

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2009</h3>		Complete if Known	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/526,267-Conf. #6419
		Filing Date	March 23, 2006
		First Named Inventor	Qingshan Huang
		Examiner Name	M. M. Tsay
		Art Unit	1656
TOTAL AMOUNT OF PAYMENT		(\$)	1,055.00
		Attorney Docket No.	H0757.70000US00

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>23/2825</u> Deposit Account Name: <u>Wolf, Greenfield & Sacks, P.C.</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

2. EXCESS CLAIM FEES														
Fee Description	Fee (\$)	Small Entity Fee (\$)												
Each claim over 20 (including Reissues)	52	26												
Each independent claim over 3 (including Reissues)	220	110												
Multiple dependent claims	390	195												
<table style="width: 100%;"> <tr> <td style="width: 33%;"> Total Claims _____ - 20 or HP = _____ </td> <td style="width: 33%;"> Extra Claims _____ x _____ = _____ </td> <td style="width: 33%;"> Fee Paid (\$) _____ </td> </tr> <tr> <td colspan="3"> HP = highest number of total claims paid for, if greater than 20. </td> </tr> <tr> <td> Indep. Claims _____ - 3 or HP = _____ </td> <td> Extra Claims _____ x _____ = _____ </td> <td> Fee Paid (\$) _____ </td> </tr> <tr> <td colspan="3"> HP = highest number of independent claims paid for, if greater than 3. </td> </tr> </table>			Total Claims _____ - 20 or HP = _____	Extra Claims _____ x _____ = _____	Fee Paid (\$) _____	HP = highest number of total claims paid for, if greater than 20.			Indep. Claims _____ - 3 or HP = _____	Extra Claims _____ x _____ = _____	Fee Paid (\$) _____	HP = highest number of independent claims paid for, if greater than 3.		
Total Claims _____ - 20 or HP = _____	Extra Claims _____ x _____ = _____	Fee Paid (\$) _____												
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Indep. Claims _____ - 3 or HP = _____	Extra Claims _____ x _____ = _____	Fee Paid (\$) _____												
HP = highest number of independent claims paid for, if greater than 3.														
<table style="width: 100%;"> <tr> <td style="width: 33%;">Multiple Dependent Claims</td> <td style="width: 33%;">Fee (\$)</td> <td style="width: 33%;">Fee Paid (\$)</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </table>			Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)	_____	_____	_____						
Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)												
_____	_____	_____												

3. APPLICATION SIZE FEE				
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).				
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ - 100 = _____	_____ / 50 = _____	(round up to a whole number) x _____	= _____	
4. OTHER FEE(S)				
				Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)				
Other (e.g., late filing surcharge): 2501 Utility issue fee				755.00
1504 Publication fee for early, voluntary, or normal ...				300.00

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	62,868
Name (Print/Type)	Daniel W. Young, Ph.D.	Telephone	617.646.8000
		Date	October 23, 2009

Certificate of Electronic Filing Under 37 CFR 1.8	
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).	
Dated: October 23, 2009	Signature: (Lisa A. Walsh)